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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR Declaration
Submitted Submitted after
with Initial Filing Initial Filing

Attorney Docket Number	410.019
First Named Inventor	HEUX et al
COMPLETE IF KNOWN	
Application Number	PCT/FR00/01628
Filing Date	June 13, 2000
Group Art Unit	
Examiner Name	

As a below-named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MICROFIBRILLATED AND/OR MICROCRYSTALLINE DISPERSION, IN
PARTICULAR OF CELLULOSE, IN AN ORGANIC SOLVENT**

(Title of the Invention)

The specification of which

is attached hereto
OR

was filed on (MM/DD/YYYY)

06/13/00

as United States Application Number or PCT International

Application Number

PCT/FR00/01628

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 35 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
			YES	NO	YES	NO
99/07493	France	06/14/99	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

(Page 1 of 5)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks Washington, DC 20231.

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D-1457

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DECLARATION

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Bierman, Muserlian and Lucas	18,818		
Jordan B. Bierman	18,629		
Charles A. Muserlian	19,683		
Donald C. Lucas	31,275		

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name: Charles A. Muserlian
 Address: Bierman, Muserlian and Lucas
 Address: 600 Third Avenue
 City: New York State: NY ZIP: 10016
 Country: U.S.A. Telephone: 212-661-8000 Fax: 212-661-8002

I hereby declare that all statements made heretofore of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

A petition has been filed for this unsigned inventor.

Given Name	Laurent	Middle Initial	Family Name	HEUX	Suffix e.g. Jr.
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Inventor's Signature	L-HEUX <i>[Signature]</i> <i>frx</i>	Date	24-11-01 (Nov 24, 2001)
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Residence: City	Saint-Martin D'Uriage	State	Country	France	Citizenship	France
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Post Office Address	D'Uriage, France					
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Additional inventors are being named on supplemental sheet(s) attached hereto.

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HT015801 (B-96)

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Celine				BONINI			
Inventor's Signature		Bonini Celine Bonini				Date	
Residence: City		Grenoble FRX		State		Country	
Post Office Address		59, cours Berriat, F 38000 Grenoble, France		France		Citizenship	
Post Office Address							
City		Grenoble		State		Zip F 38000 Country France	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City				State		Country	
Post Office Address						Citizenship	
Post Office Address							
City				State		Zip	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City				State		Country	
Post Office Address						Citizenship	
Post Office Address							
City				State		Zip	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City				State		Country	
Post Office Address						Citizenship	
Post Office Address							
City				State		Zip	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							